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Bib Data Sheet

CONFIRMATION NO. 1401

SERIAL NUMBER 09/683,733	FILING DATE 02/07/2002 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO. BUR920010167
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 02/14/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 4	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				

**ADDRESS**

23550

**TITLE**

Custom pricing system and method

FILING FEE RECEIVED 932	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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